Cochise County Jail Inmate Grievance – Level One

TO: ()FFICER ON DUTY	Received By: 928	Date/1	Time: 3/3///9
From: + ILLS, KRISTINA Inmate Name	OO O O ULL	CB-13 Pod/Cell#	3 31 2019 Date
I. Grievance (To be completed by Inma	te): Describe the reasons and nat	ure for your complaint.	
LAW LIBRARY (CCSO			ABORATION \$/01
CLEARLY & COMPLETE	LY DEFINED STA	TUTE REFERE	NCES / CASE
MATERIAL FOR ME			<u>-</u>
ARE PROVIDED TO		/	
II. Grievance (To be completed by Inma formal grievance. - CONTACTED MY THAT I WILL E ISSUES WITHIN TIME STAFF AS TO HOW I (SOLELY) VIA THESE	LAWYER WI BE ILL-EQUIPPED CONSTRAINTS/DE CAN MEET MY	TH GENUNDED TO HANDE ADUNES - IN Y LEGAL NE	E CONCERN SOME LEGAL QUIRED WITH CCSC SEDS ADEQUATA
III. Grievance (To be completed by Inma			
PIEASE ALLOW -	THOROUGH & CO	MOLETE ACCI	ESS TO TRUE
LEGAL MATERIAL			
RIGHTS PERTAIN	VING TO INM	NATES (PR	ISONERS RIGHTS
Krustinken 4	Hills	3/30/20 Date	19
IV. Duty Officer's resolution (to be comp	pleted by duty officer prior to for	warding to Shift Supervisor):
This matter is non gri	evable. Any inform	nation on the	Law Library
is what we curre	ntly have and ar	y missing infor	mation can
be requested through	the courts and/o	r Indigent Def	ènse Coardinator.
		4/3/19	
Officer's Signature		Date	